

(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

NOV 0 1 2018

NEW HAMPSHIRE

PLEASE PRINT

Judy A. Silva, Cordell A. Johnston, Barbara T. Reid, Timothy W. Fortioer I. Name of Lobbyist(s) II. Name of lobbyist's partnership, firm or corporation, if any: New Hampshire Municipal Association (Name of partnership, firm or corporation) 25 Triangle Park Drive NH Concord 03301 Business Address: (Town/City) (State) (Zip Code) III. This statement covers: (Choose one - file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client). All reportable transactions occurring in the months prior to the reporting date relative to the following client: New Hampshire Municipal Association (Full Name of Client as it appears on the Lobbyist Registration Form) OR ☐ All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. IV. Date of Report April 25, 2018 🛘 July 25, 2018 🔲 activity from date of registration to 3/31/18 activity from 4/1/18 to 6/30/18 Reports cover: October 31, 2018 January 30, 2019 🗌 activity from 7/1/18 to 9/30/18 activity from 10/1/18 to 12/31/18 V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301. VI. Check if additional reports are attached: X If you have received fees or made expenditures, you must file Addendum A- Fees and Expenses ☐ If you have paid an honorarium or reimbursed expenses, you must file Addendum B- Report of Honorariums or Expense Reimbursement If you, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions Sworn Statement/Affirmation by Lobbyist 1 have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief. October 30, 2018 (Date) lobbyis (Signature Judy

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

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NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) Judy A. Silva, Cordell A. Johnston, Barbara T. Reid, Timothy W. Fortier				
II. Name of lobbyist's partnership, firm or corporation, if any: New Hampshire Municipal Association				
(Name of partnership, firm or corporation)				
III. Name of Client New Hampshire Municipal Association Date October 30, 2018				
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The gro reduced by any expenses:	relations, or public relations services ss fee amount reported shall not be			
a) Total of all fees received in this reporting period	a) \$ 6,352.44			
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year.	a) \$ 6,352.44 b) \$ 71,389.55 ar)			
c) Total of all fees received to date (Add lines a and b)	c) \$ _77,741.99			
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) § 0.0			
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to reportees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report mexpenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office expendividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	lient and if expenditures are made by lay be filed for the lobbyist(s)/firm. aggregate total of all expenses paid penses; (b) the aggregate total of all ex meals purchased during a business s than \$10 that is given to the person d with a value of \$25.00 or less); and ting period of greater than \$25.00 for e of greater than \$25, purchase of a than \$25, but not greater than \$50, expense reimbursement, or political			

support staff, and office expenses, related directly or indirectly to lobbying.

b) Total aggregate of expenditures during this reporting period, not reported

c) Total of all itemized expenditures reported in detail in section VI.

in a), of \$25 or less.

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ 6,342.44
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ 71,389.55
f) Total of all expenses year to date	_{f) \$} 77,741.99
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
•	•••••••••••••••••••••••••••••••••••••••
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
Jardy Wille	October 30, 2018
(Signature of obbyist)	(Date)
Judy A. Silva	

(Print Name of lobbyist)

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NEW HAMPSHIRE DEPARTMENT OF STATE

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

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Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

(Print Name of lobbyist)

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:				
	-	Cordell A.	Johnston	
Name of Lobbying partnership, firm, or corporation: Cordell A. Johnston Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any				
Date of Report (chec	k one):			
April 25, 2018 □	July 25, 2018 🗆	October 31, 2018	January 30, 2019 □	
the following Addendations submitted):			nd Expenses described above, ar number of Addendum forms beir	
X Addendum A	(s).			
Addendum B	(s).			
Addendum C	(s).			
-	irm that the foregoing in of my knowledge and bel		ent and each Addendum is true an	
Onalelle Cal	lund	Oc	tober 30, 2018	
(Signature of lobby)			(Date)	
Cordell A. Jo	hnston			

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

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NEW HAMPSHIRE DEPARTMENT OF STATE

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: Barbara I. Reid Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): New Hampshire Municipal Association				
				particular client): Nev
Date of Report (check	one):			
April 25, 2018 🗆	July 25, 2018 □	October 31, 2018	January 30, 2019 □	
_			nd Expenses described above, umber of Addendum forms be	
X Addendum A(s	3).			
Addendum B(s	s).			
Addendum C(s	s).			
I hereby swear or affir complete to the best of			nt and each Addendum is true	and
200	Red	Oc	tober 30, 2018	
(Signature of lobbyist)			(Date)	
Barbara T. Re	eid			
(Print Name of lobbyis	t)			

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

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Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: Timothy W. Fortier			
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): New Hampshire Municipal Association			
Date of Report (check one):			
April 25, 2018 □ July 25, 2018 □ Oct	ober 31, 2018 ■ January 30, 2019 □		
	ement of Income and Expenses described above, and ement (insert the number of Addendum forms being		
Addendum A(s).			
Addendum B(s).			
Addendum C(s).			
I hereby swear or affirm that the foregoing information complete to the best of my knowledge and belief.	tion on the Statement and each Addendum is true and		
Im W to	October 30, 2018		
(Signature of lobbyist)	(Date)		
Timothy W. Fortier			
(Print Name of lobbyist)			